

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

ATTORNEY'S DOCKET NO.: CIMA 3.0-036

N I Ii S	My residence, mailing address and citizens believe I am the original, first and sole is isted below) of the subject matter which is SEQUENTIAL DRUG DELIVE is attached hereto was filed on as Un (if applicable).	was filed on as United States Application Number or PCT International Application Number and was amended (if applicable). tate that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any					
I	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.						
I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:							
	PRIOR FOREIGN APPLICATION(S	5)					
	COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, day, year)	PRIORITY CLAIMED			
	COUNTRY	AFFLICATION NUMBER	(month, day, year)	YES NO			
P				YES NO			
				YES NO			
-1	LISTING OF FOREIGN APPLICATION	NS CONTINUED ON PAGE 3 HER	EOF YES NO				
	hereby claim the benefit under Title 35, U	ation(s) listed below:					
ų.	Application 1	Number:	Filing Date:				
	Application l	Number:	Filing Date:				
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Fed Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date this application:							
Į	J.S. Parent Application Serial Number:	Parent Filing	Date:	Parent Patent No.:			
ι	J.S. Parent Application Serial Number:	Parent Filing	Date:	Parent Patent No.:			
F	PCT Parent Number:	Parent Filing I	Parent Filing Date:				
I	LISTING OF US APPLICATIONS CONT						
F	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530						

DIRECT ALL CORRESPONDENCE TO: Customer No. 000530





DECLARATION -- Page 2

ATTORNEY DOCKET NO. CIMA 3.0-036

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	Full name of sole or first inventor (given name, family name): S. INDIRAN PATHER			
	Inventor's signature	Date		
	Residence: Plymouth, MN Citizenship: Republic of South Africa Mailing Address: 13240 Sunset Trail, Plymouth, Minnesota 55441			
	Full name of second joint inventor, if any (given name, family name): JOHN HONTZ			
	Second Inventor's signature	Date		
	Residence: Plymouth, MN Citizenship: U.S.A. Mailing Address: 12800 54th Avenue, North, Plymouth, Minnesota 55442			
	Full name of third joint inventor, if any (given name, family name): JOHN M. SIEBERT			
	Third Inventor's signature	Date		
	Residence: Eden Prairie, MN Citizenship: U.S.A. Mailing Address: 10759 Mount Curve Road, Eden Prairie, Minnesota 55347			
	Full name of fourth joint inventor, if any (given name, family name):			
	Fourth Inventor's signature	Date		
	Residence: Citizenship: Mailing Address:			
	The control of the co			
	Full name of fifth joint inventor (given name, family name):			
ب اط	Fifth Inventor's signature	Date		
	Residence: Citizenship:			
	Mailing Address:			
*	Full name of sixth joint inventor, if any (given name, family name):			
	Sixth Inventor's signature	Date		
	Residence: Citizenship:			
	Mailing Address:			
	Full name of seventh joint inventor, if any (given name, family name):			
	Seventh Inventor's signature	Date		
	Residence: Citizenship:			
	Mailing Address:			
	Full name of eighth joint inventor, if any (given name, family name):			
	Eighth Inventor's signature	Date		
	Residence: Citizenship: Mailing Address:			
	☐ Additional inventors are being named on separately numbered sheets attached hereto.			